

OCT 06 2006

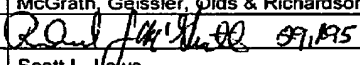
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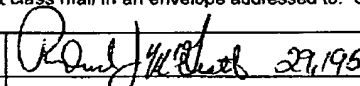
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|---|------------------------|---------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/072,364    |
|   | Filing Date            | Feb 6, 2002   |
|   | First Named Inventor   | SADOT, Emek   |
|   | Art Unit               | 2194          |
|   | Examiner Name          | ANYA, Charles |
| Total Number of Pages in This Submission  | Attorney Docket Number | 3655/0138PUS1 |

| ENCLOSURES (Check all that apply)   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Associate Power of Attorney, Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance communication to (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks _____   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |          |       |
|--|---|----------|-------|
| Firm Name                                  | McGrath, Geissler, Olds & Richardson, PLLC  |          |       |
| Signature                                  |  |          |       |
| Printed name                               | Scott L. Lowe   |          |       |
| Date                                       | October 6, 2006   | Reg. No. | 41458 |

| CERTIFICATE OF TRANSMISSION/MAILING   |   |      |                 |
|---|---|------|-----------------|
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| Typed or printed name   | Scott L. Lowe   | Date | October 6, 2006 |

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Application Nos.: | Filed:     |
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| 09/061,682        | 04/16/1998 |
| 09/837,929        | 04/19/2001 |
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| 11/476,063        | 06/28/2006 |
| 11/476,064        | 06/28/2006 |

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Commissioner for Patents  
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Dear Sir:

I hereby appoint the attorney(s) indicated below as associate attorney(s) in the aforementioned application(s), with full power solely to prosecute said application(s), to make alterations and

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amendments therein, to receive the patent, and to transact all business in the United States Patent and Trademark Office connected with the prosecution of said application(s).

Attorneys and agents of:

McGrath, Geissler, Olds &amp; Richardson, PLLC

OR

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No other powers are granted to such associate attorney(s) and such associate attorney(s) are specifically denied any power of substitution or revocation.

Respectfully Submitted,

8/2/2006  
Date

  
Brian K. Dinicola, Esq.  
Reg. No. 36,122